REMARKS

Status of the Application

Claims 1-72 are pending in the application, claims 1-12, 17-19, 33, 53 and 54 stand rejected and claims 13-16, 20-32, 34-52 and 55-72 stand withdrawn from consideration.

Claims 13-16 and 20-72 are hereby canceled by this Amendment. Applicants reserve the right to pursue the subject matter of these claims in continuation applications.

Claim Rejections - 35 U.S.C. § 103

Claims 1-12, 17-19, 33, 53 and 54 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over Wong et al. (US 6,260,021) in view of Marchosky (2002/0029157).

Wong relates to an object oriented system and method for rapidly distributing medical images from exiting picture and report storage systems to a plurality of client workstations. The system provides image objects with uniform structure regardless of the type of system in which they are stored.

Marchosky is related to a medical records database and a diagnostic program wherein individual patient medical and biographical records are owned by individual patients who can enter information in their record as well as grant or deny authorization to others, such as health care professionals, to review part of their record. The diagnostic program provides a series of diagnostic questions to an individual wherein each potential response is weighted relative to its importance to a particular diagnosis. The diagnostic program provides a diagnosis based on the answers provided by either a doctor or a patient in response to various inquiries.

In the rejection, the Examiner contends Wong discloses most of the features recited in claim 1, but concedes Wong fails to disclose:

> [A] system wherein each of the diagnostic clients receives a same image data to be examined from the server by way of a network,

> outputs the same image data to be examined through the image output means and sends individual diagnoses input through the diagnosis input means for the respective images represented by the same image data to be examined to the server by way of a network.

(*Office Action*, p. 4)

To compensate for Wong's deficiency, the Examiner applies Marchosky contending:

> However, such a system component allowing multiple doctors [to] receive the same medical image and then transmit their diagnosis is well known in the art as evidenced by Marchosky.

(*Office Action*, p. 4; *citing Marchosky*, Figs. 4A-E, par. 10, 11 and 91).

However, Applicants respectfully submit Wong is further deficient than alleged by the Examiner. Specifically, Applicants submit Wong fails to disclose "a result output means for outputting the result of examination obtained on the basis of the individual diagnoses" as recited in claim 1

In the Office Action, the Examiner contends Wong teaches this feature citing column 1, line 66 through column 2, line 3, column 9, lines 34-63, column 11, lines 29-48 and column 13, lines 26-62. (*Office Action, Response to Arguments*, p. 15). In response, Applicants submit Wong fails to disclose this feature for the following reasons.

The first portion of Wong cited by the Examiner (column 1, line 66 through column 2) is directed to specialized department scale systems for storing and retrieving diagnostic cardiology images, for interfacing to and reporting from laboratory instruments, for pharmacy management, and so forth. This portion fails to disclose any result output means for outputting the result of examination obtained on the basis of the individual diagnoses. This system merely stores and retrieves various data; nowhere does this portion determine any result based on individual diagnoses. Rather, this system is limited to retrieving an individual diagnosis. Absent is any disclosure related to using a plurality of diagnosis (i.e., diagnoses) to determine the result of examination.

The second portion of Wong (i.e. column 9, lines 34-63) cited by the Examiner merely relates to middleware software. This portion fails to even mention any diagnostic features at all. Rather, this portion is related to the network architecture of Wong's system.

The third portion of Wong cited by the Examiner (col. 11, lines 29-48) relates patient information including object interfaces and demographic information, patient visit information, patient study information, study component information, for the relation of the image and patient information. Additionally, this portion discloses interpretation information which includes object interfaces that provide for results and interpretation information. (col. 11, lines 40-44). To the extent that this portion discloses results and interpretation information, it fails to disclose that the result of examination is obtained on the basis of the individual diagnoses. In fact, this portion fails to disclose how any results are obtained.

The fourth portion of Wong cited by the Examiner (i.e., column 13, lines 26-62) is directed to user profiles and preferences which permit the user to access the medical image distribution system at any workstation. (col. 9, lines 26-30). Additionally, web server data segment 94, components of the graphical user interface, and the object infrastructure are discussed. Again, none of these portions even remotely disclose any diagnostic information.

Consequently, Applicants submit Wong is further deficient than alleged by the Examiner, and thus, fails to disclose, at least, "a result output means for outputting the result of examination obtained on the basis of the individual diagnoses," as recited in claim 1.

Additionally, Marchosky also fails to disclose such a feature. While Marchosky discloses that a doctor may utilize the medical diagnostic program 116, this program merely provides a diagnosis based on answers to various questions which are input by the doctor. (par. [0050]). No portion of Marchosky discloses the recited result output means for outputting the results of

examination obtained on the basis of the individual diagnoses where the diagnoses are obtained on the basis of visible images.

Therefore, Applicants submit that because neither Wong nor Marchosky, either taken alone or in combination disclose, a result output means for outputting the result of examination obtained on the basis of the individual diagnoses, claim 1 is allowable over the applied combination.

Additionally, Applicants submit claims 2-12 are allowable, at least by virtue of their dependency.

Regarding claim 17, because this claim recites features similar to those discussed above with regard to claim 1, Applicants submit claim 17 is allowable for the same reasons set forth above.

With further regard to claims 2, 8, 10 and 18, as alleged by the Examiner, in Wong's system, a server sends various information to a client in response to the request from the client. However, as the Examiner has also conceded, Wong fails to disclose that "each of the diagnostic clients receives a same image data to be examined from the server by way of a network, outputs the same image data to be examined through the image output means and sends individual diagnoses input through the diagnosis input means for the respective images represented by the same image data to be examined to the server by way of the network.." Applicants note that Wong fails to disclose "the server receives a predetermined number of said (the individual) diagnoses, sends information to the effect that the server has received a predetermined number of said diagnoses to the management client and the management client is provided with an information receiving and output means which receives the information and outputs the same," as recited in claim 2. In other words, Wong fails to teach or suggest that the server sends

information that "the server has received a predetermined number of said diagnoses" as an example of various information. This feature is not disclosed by either Wong or Marchosky.

With further regard to claims 3 and 11, in Marchosky, a diagnostic program automatically determines a list of potential diagnoses based on weighted responses to diagnostic questions and other information. On the other hand, the present invention, as recited in claims 3 and 11, automatically determines the result of the examination based on the individual diagnoses for the same image. Accordingly, at least the information used in the automatic determination is different between Marchosky's diagnostic program and the invention as recited in claims 3 and 11.

With further regard to claims 4, 6, 12 and 19, these claims describe a weighting attributable to the diagnosis made by individual doctors. The weighting described by paragraph [94], cited by the Examiner, relates to the weighting of a likelihood of disease. This is based on the user supplied responses to a questionnaire. The weighting of Marchosky does not correspond to that described by claims 4, 12 and 19.

New Claims

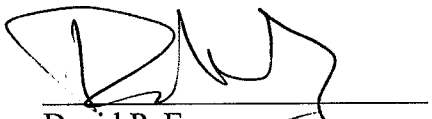
New claims 73-75 are hereby added by this Amendment and submitted to be allowable, at least by virtue of their dependency.

Conclusion

In view of the above, reconsideration and allowance of this application are now believed to be in order, and such actions are hereby solicited. If any points remain in issue which the Examiner feels may be best resolved through a personal or telephone interview, the Examiner is kindly requested to contact the undersigned at the telephone number listed below.

The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.

Respectfully submitted,



David P. Emery
Registration No. 55,154

SUGHRUE MION, PLLC
Telephone: (202) 293-7060
Facsimile: (202) 293-7860

WASHINGTON OFFICE
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